

APPLICATION/REGISTRATION FORM FOR CERTIFIED TECHNICIAN

() Radiologic Physicist
() X-Ray Survey Technician

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PERSONAL INFORMATION		EDUCATION			
Name: _____ Address: _____ _____ _____ Telephone: Work () _____ Home () _____		High School : _____ _____ College : _____ _____ Advanced Degree : _____			
WORK EXPERIENCE					
EMPLOYER		Yrs. EMPLOYED		DESCRIPTION OF WORK PERFORMED	
EQUIPMENT USED					
MEASURING:			CALIBRATION:		
SERVICES and/or SURVEYS to be PERFORMED					
RADIOLOGIC PHYSICIST <i>if</i> APPLICATION is <i>for</i> SURVEY TECHNICIAN					